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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re patent application of: Rao et al.

Serial No.: 09/109,858

Group No.: 1633

Filed: July 2, 1998

Examiner: J. Kerr

For: LINEAGE-RESTRICTED NEURONAL  
PRECURSORS

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Date of Deposit: November 6, 2000

I hereby certify that this paper is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Assistant Commissioner for Patents, Box CPA, Washington, D.C. 20231.

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11/08/2000 AGDITOM 00000050 09109858  
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Assistant Commissioner for Patents  
Washington, DC 20231

Sir:

PETITION FOR EXTENSION OF TIME

Petition is hereby made under 37 C.F.R. 1.136(a) to extend the time for response to the Office Action of **May 24, 2000** to and through **November 24, 2000** comprising an extension of the shortened statutory period of **three (3) month(s)**:

|            | SMALL ENTITY |       | OTHER THAN<br>SMALL ENTITY |        |
|------------|--------------|-------|----------------------------|--------|
| One Month  |              | \$ 55 |                            | \$ 110 |
| Two Months |              | \$180 |                            | \$ 360 |

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|                                       |   |       |  |                                    |
|---------------------------------------|---|-------|--|------------------------------------|
| Three Months                          | x | \$445 |  | \$ 840 <del>00</del> <del>00</del> |
| Four Months                           |   | \$660 |  | \$1,320                            |
| Additional fee for extended response: |   |       |  | \$445.00                           |

(xx) An extension for 1 month has already been secured and the fee paid therefore of \$55.00 is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request

\$ 390.00

(xx) A Credit Card payment form in the amount of \$825.00 is enclosed (\$390.00 for extension of time; \$435.00 filing fee). Please charge any deficiency or credit any overpayment to Deposit Account No. 12-1086.

( ) Please charge the fee to Deposit Account No. 12-1086.

This form is submitted in duplicate.

Date: November 6, 2000

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